

CHILD CARE CENTER

Date: _____ Start Time: _____ End Time: _____ Type of Survey: _____

Facility Name: _____ Phone Number: _____

Address: _____ Capacity: _____

Director's Name: _____

Notes: _____

/	#	R430-100-	KEY WORDS	NOTES
<i>PARENT AREA - OBSERVATION</i>				
	5	11(3)	sign-in and sign-out	
	5	18(3)(d)	approved menus	
	5	18(6)(f)	meals and snacks at least every 3 hrs	
	5	24(6)	evacuation plans posted	
	3	12(4)	outdoor play included in activity plan	
	1	12(2)	activity plan posted	
	1	18(3)(c)	menu posted with substitutions noted	
	1	18(6)(a)	different menus each day	
	1	18(6)(b)	menus may be cycled	
	1	430-2-7(3)	post license	
	1	11(1)	post and distribute Informational Guide	

/	#	R430-100-	KEY WORDS	NOTES
INFANT/TODDLER AREA - OBSERVATION				
	10	7(1)	direct supervision	
	10	7(2)	meet needs of children	
	10	25(13)	infant sleeping equipment:	
	10	25(13)(a)	1 infant per piece of equipment	
	10	25(13)(c)	no mats or cots for infants	
	7	16(1)	maintain toys and equipment	
	7	16(4)	electrical outlets capped	
	7	25(1)	cared for in separate areas	
	7	25(3)	follow own sleeping and eating patterns	
	7	25(8)	no walkers with wheels	
	7	25(9)	high chair safety straps	
	5	25(2)	no infants with mixed ages	
	5	25(11)	baby food, infant formula, and breast milk brought from home:	
	5	25(11)(a)	labeled with child's name	
	5	25(11)(b)	labeled with date of preparation	
	5	25(11)(c)	refrigerated	
	3	25(5)	4 weeks of infant records - diapering, sleeping, feeding	
	3	25(14)	two sinks (after 7/97)	
	3	25(15)	70 degrees at floor level	

/	#	R430-100-	KEY WORDS	NOTES
INFANT/TODDLER AREA - POTENTIAL QUESTIONS THAT MAY BE ASKED OF STAFF				
	10	25(13)(b)	How do you lay an infant down to sleep?	
	7	25(4)	How often do you check and/or change children's diapers ?	
	7	25(6)	How do you feed infants who can't yet sit up and hold their own bottle?	
	7	25(16)	How often do wash toys?	
	5	25(10)	How often do you wash, rinse, and sanitize high chair trays ?	
	5	25(7)	What is the longest period of time you will allow an awake child to stay in a piece of equipment? Why?	
	5	25(11)(d)	How long do you keep baby food, formula, and breast milk after its preparation or opening?	
	3	25(12)	How long do you keep infant formula after a feeding or initiating a feeding?	
DIAPERING AREA - OBSERVATION				
	7	15(2)	railings	
	7	15(3)	non-absorbent diapering surface	
	5	15(4)	lined container with lid	
	1	15(1)	procedures posted	
DIAPERING AREA - POTENTIAL QUESTIONS THAT MAY BE ASKED OF STAFF				
	7	15(6)	What are your hand washing practices? (how? when?)	
	7	15(3)	How often do you clean and sanitize the diapering surface?	
	5	15(5)	How often do you clean and disinfect the diaper container ?	
	3	15(7)	Are cloth diapers are used? If so, how do you handle them?	

/	#	R430-100-	KEY WORDS	NOTES
CHILDREN INDOOR AREA - OBSERVATION				
	10	7(1)	direct supervision	
	10	7(2)	meet needs of children	
	10	9(1)	Ratio Ages Group Size 1:4 0-12 mo 8 1:4 13-24 mo 8 1:7 2 yr 14 1:12 3 yr 24 1:15 4 yr 30 1:20 5+ yr 30	
	10	9(3)	Ratio Ages Group Size <u>2 Ages Mixed</u> 1:4 infants, toddlers 8 1:5 toddlers, 2s 10 1:9 2s, 3s 18 1:14 3s, 4s 25 1:18 4s, 5+s 25 <u>3 Ages Mixed</u> 1:7 toddlers, 2s, 3s 14 1:11 2s, 3s, 4s 22 1:16 3s, 4s, 5+s 25 <u>4 Ages Mixed</u> 1:9 toddlers, 2s, 3s, 4s 18 1:13 2s, 3s, 4s, 5+s 25	
	10	9(3)(b)	mixed age group with 50% younger age	
	10	16(7)	portable space heaters, fireplaces and wood burning stoves	
	7	6(1)	licensee supervises facility	
	7	6(2)(a)	compliance with laws, overall organization, management, operation, control of center	
	7	12(3)(a)	35 square feet per child	
	7	12(3)(c)	indoor cushioning/6 ft fall zone	
	7	12(3)(d)	maximum heights of indoor equipment ages 3 to 6 - 5½ ft ages under 3 - 3 ft	
	7	16(1)	maintain spaces, toys, equipment	
	7	16(9)	strings and cords	
	7	21(1)	adequate housekeeping	
	5	16(4)	electrical outlets capped	
	5	16(5)	safety glass	

/	#	R430-100-	KEY WORDS	NOTES
	5	21(5)	draperies, carpets, and furniture in good repair	
	5	21(6)	plaster, wallpaper, paint, floor coverings, tile in good repair	
	5	22(2)	cooling system - 80 degrees or less	
	5	22(3)	heating system - 72 degrees or more	
	5	22(6)	hand washing sinks	
	3	12(1)	activity plan	
	3	16(8)	poisonous plants	
	3	21(2)	laundry	
	3	21(3)	storage of clean laundry	
	3	22(1)	adequate ventilation	
	3	22(4)	adequate lighting	
	1	12(2)	activity plan posted	
	1	12(3)(b)	areas not included in square footage	
	1	16(10)	lead-based paint	
<i>CHILDREN INDOOR AREA - POTENTIAL QUESTIONS THAT MAY BE ASKED OF STAFF</i>				
	10	18(6)(e)	Are you aware of any children with allergies or food sensitivities?	
	7	9(2)	Are you ever the only care giver in the center? How many children are you caring for during that time?	
	7	11(5)	What is your procedure concerning injury, incident, and accident reports?	
	7	14(3)	How often do you clean and sanitize indoor activity equipment?	
	7	14(4)	How often do you machine-wash stuffed animals and dress-up clothes?	
	7	14(5)	Do you use water tables? If so, how often do you clean and sanitize them?	
	5	9(4)	Are your nap time ratios different from your usual ratios?	
	5	9(5)	When do you count children of employees in ratios?	

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<i>SLEEP AREA - OBSERVATION</i>				
	7	23(1)	separate crib, cot, bed, mat	
	7	23(3)	mats cleanable	
	7	23(5)	sheet and blankets:	
	7	23(5)(a)	used daily	
	7	23(5)(b)	assigned to child	
	7	23(5)(c)	stored separately	
	3	23(3)	mats 2 in thick	
	3	23(6)	environment for resting and sleeping children	
<i>SLEEP AREA - POTENTIAL QUESTIONS THAT MAY BE ASKED OF STAFF</i>				
	7	23(2)	How far apart do you place sleeping equipment?	
	7	23(4)	How often do you clean and sanitize mats and sleeping equipment?	
	7	23(5)(d)	How often do you launder sheets and blankets or how often are they sent home to be laundered?	
<i>BATHROOM - OBSERVATION</i>				
	7	14(7)(e)	single use towels from a covered dispenser or electric hand-drying	
	7	16(11)	hot water less than 120 degrees	
	3	14(6)	hand washing procedures posted	
	3	22(5)	number of toilets - 1:15	
<i>BATHROOM - POTENTIAL QUESTION THAT MAY BE ASKED OF STAFF</i>				
	7	14(6)	What are your hand washing practices? (how? when?)	

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<i>CHEMICALS - OBSERVATION</i>				
	10	16(6)	not accessible proper containers	
<i>KITCHEN - OBSERVATION</i>				
	10	18(6)(e)	post list of allergies and sensitivities	
	7	18(3)	food brought from home labeled with child's full name and refrigerated	
	1	18(1)	Food Service Sanitation Regulations local health regulations	
<i>KITCHEN - POTENTIAL QUESTIONS THAT MAY BE ASKED OF STAFF</i>				
	5	18(5)	On what do you serve children's food?	
	3	18(2)	Do parents ever bring in food for all of the children? Is it home-made or store- bought?	
<i>FIRST AID KIT AND BODILY FLUIDS CLEAN-UP KIT - OBSERVATION</i>				
	7	24(9)(a)	contents of first aid kit	
	7	24(9)(c)	restocked after use inaccessible to children	
	3	14(1)(a)	contents of bodily fluids clean-up kit	
	3	24(9)(b)	first aid manual	
	3	14(1)(b)	comply with OSHA standards	
<i>FIRST AID KIT AND BODILY FLUIDS CLEAN-UP KIT - POTENTIAL QUESTIONS THAT MAY BE ASKED OF STAFF</i>				
	7	24(9)	Where is the first aid kit for the center? Where is the first aid kit located that is taken on field trips?	
	3	14(1)	Where is the bodily fluids clean-up kit and when and how is it used?	

/	#	R430-100-	KEY WORDS	NOTES
<i>MEDICATION - OBSERVATION</i>				
	10	13(5)	secured from access to children	
	7	13(6)	original or pharmacy container original label child's name child proof caps written instructions	
	7	13(7)	refrigerated medications in covered container with tight fitting lid	
	7	13(2)	medication release form:	
	7	13(2)(a)	-name of medication	
	7	13(2)(b)	-dosage	
	7	13(2)(c)	-route of administration	
	7	13(2)(d)	-times and dates to be administered	
	7	13(2)(e)	-illness or condition	
	7	13(2)(f)	-parent signature	
	7	13(3)	administration of medication:	
	7	13(3)(a)	-times, dates, dosages given	
	7	13(3)(b)	-signature or initials	
	7	13(3)(c)	-report errors in administration or adverse reactions	
	1	13(8)	return unused and out-of-date medications	
<i>MEDICATION - POTENTIAL QUESTIONS THAT MAY BE ASKED OF STAFF</i>				
	10	13(4)	What would you do if a child had an adverse reaction to a medication or you made an error in the administration of a medication?	
	7	13(1)	Do you give medication? If so, what training have you received in the administration of medications?	

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<i>ANIMALS - OBSERVATION</i>				
	10	19(4)	not dangerous or aggressive	
	7	19(1)	clean and in good health	
	7	19(3)	confined or on leash	
	7	19(5)	not in food areas	
<i>ANIMALS - POTENTIAL QUESTIONS THAT MAY BE ASKED OF STAFF</i>				
	7	19(6)	Are you responsible for the cleaning of animal cages and equipment? If so, where does this cleaning take place?	
	7	19(8)	How do children interact with turtles, lizards and other reptiles?	
<i>VEHICLES - OBSERVATION</i>				
	10	20(3)(c)	safety restraints	
	5	20(1)	registration and safety inspection	
	5	20(2)	safe and clean condition	
	7	20(3)(a)	first aid and body fluid clean-up kit	
	7	20(3)(d)	enclosed	
<i>VEHICLES - POTENTIAL QUESTIONS THAT MAY BE ASKED OF DRIVER/STAFF</i>				
	10	20(6)	Do you smoke while transporting children?	
	10	20(8)	If you must leave the vehicle, what do you do? Do children remain seated while the vehicle is in motion? How do you ensure this?	
	7	20(3)(b)	Does the vehicle have adequate heat and air conditioning while transporting children?	
	5	20(3)(e)	Do you keep doors locked or unlocked during transport?	

/	#	R430-100-	KEY WORDS	NOTES
<i>OUTSIDE AREA - OBSERVATION</i>				
	10	7(1)	direct supervision	
	10	7(2)	meet needs of children	
	10	12(5)(d)	animal excrement, harmful objects, standing water	
	7	12(5)(a)	40 square feet per child	
	7	12(5)(c)	4 ft high fence:	
	7	12(5)(c)(i)	gaps no more than 3½ in	
	7	12(5)(c)(ii)	bottom edge - gaps no more than 3½ in	
	7	12(5)(e)	shaded area	
	7	16(1)	maintain spaces, toys, grounds, equipment	
	7	21(7)	entrances, exits, steps, outside walkways	
	3	12(5)(b)	directly adjacent	
<i>OUTSIDE AREA - POTENTIAL QUESTION THAT MAY BE ASKED OF STAFF</i>				
	7	12(5)(f)	How do you ensure that children have access to drinking water when the temperature is more than 75 degrees?	

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DOCUMENTATION - OBSERVATION				
	7	8(1)	appropriately stored	
		ON-SITE		
	7	6(2)(b)	written policies and procedures:	
	7	6(2)(b)(i)	-care giver training and education	
	7	6(2)(b)(ii)	-exclusion for illness	
	7	6(2)(b)(iii)	-supervision	
	7	6(2)(b)(iv)	-releasing children	
	7	6(2)(b)(v)	-medications	
	7	6(2)(b)(vi)	-discipline	
	7	6(2)(b)(vii)	-transportation	
	7	6(2)(b)(viii)	-emergency and disaster plans	
	7	6(2)(b)(ix)	-tobacco, alcohol, illegal substances, and sexually explicit material	
	7	6(2)(b)(x)	-hand washing	
	7	6(2)(b)(xi)	-firearms	
	7	6(2)(b)(xii)	-food service	
	7	20(5)	transportation of children to and from school (distributed or posted)	
	7	24(1)	written emergency and disaster plan	
	7	24(2)	(above) written plans on site and accessible	
	7	24(5)	emergency plan contents (updated)	
	7	24(3)(a)	fire and disaster drills documented	
	7	24(3)(b)	drills held on a variety of days and times	
	7	24(7)	extinguishers inspected and tagged	
	5	14(7)	hand washing policies	
	5	19(2)	rabies records	
	1	8(2)(a)(v)	current Local Health Department inspection	

/	#	R430-100-	KEY WORDS	NOTES
	1	8(2)(a)(vi)	current Local Fire Department inspection	
		WITHIN 24 HOURS		
	1	8(2)(b)(iii)	copies of approved variances	
	3	20(7)	current driver's license of any drivers	
	3	8(2)(b)(ii)(D)	6 wk record of hours worked by staff	
		AT CENTER		
	7	6(5)(a)	director designee in writing	
	1	6(2)(c)	appointment of qualified director	
	1	6(4)	director qualifications	
<i>DOCUMENTATION - POTENTIAL QUESTIONS THAT MAY BE ASKED OF DIRECTOR</i>				
	7	8(1)(a)	When and how have you trained staff not to disclose personal information found in files?	
	7	8(1)(b)	How have you trained staff to know who can view confidential information?	
	7	8(1)(c)	How is permission to share confidential information obtained?	

/	#	R430-100-	KEY WORDS					NOTES							
PERSONNEL RECORDS															
SAMPLE			PERCENTAGES					1	2	3	4	5	6	7	8
Total #	Review	Missing	15	12	10	8	6								
1-6	All	1	93%	92%	90%	88%	83%								
7-12	6	2	87%	83%	80%	75%	67%								
13-20	8	3	80%	75%	70%	63%	50%								
21-40	10	4	73%	67%	60%	50%	33%								
41-60	12	5	67%	58%	50%	38%	16%								
61-80+	15	6	60%	50%	40%	25%	0%								
	1	8(2)(b)(ii)(A)	date of employment												
	1	8(2)(a)(iii)(A)	application with emergency contact												
	1	8(2)(b)(ii)(C)	BCIs												
	1	8(2)(b)(ii)(B)	health evaluation form												
	1	8(2)(b)(ii)(E)	TB screening												
	1	8(2)(b)(ii)(H)	First Aid and CPR												
	1	8(2)(a)(iii)(B)	Food Handler's within 30 days of hire												
	1	8(2)(b)(ii)(G)	orientation training												
	1	8(2)(b)(ii)(F)	annual training												
	1	7(5)	20 hours annual training 10 hours person to person												
SAMPLE			PERCENTAGES					9	10	11	12	13	14	15	16
Total #	Review	Missing	15	12	10	8	6								
1-6	All	1	93%	92%	90%	88%	83%								
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	1	8(2)(b)(ii)(A)	date of employment												
	1	8(2)(a)(iii)(A)	application with emergency contact												
	1	8(2)(b)(ii)(C)	BCIs												
	1	8(2)(b)(ii)(B)	health evaluation form												
	1	8(2)(b)(ii)(E)	TB screening												
	1	8(2)(b)(ii)(H)	First Aid and CPR												
	1	8(2)(a)(iii)(B)	Food Handler's within 30 days of hire												
	1	8(2)(b)(ii)(G)	orientation training												
	1	8(2)(b)(ii)(F)	annual training												
	1	7(5)	20 hours annual training 10 hours person to person												

/	#	R430-100-	KEY WORDS	NOTES
<i>REQUIREMENTS AND TRAINING - POTENTIAL QUESTIONS THAT MAY BE ASKED OF STAFF IF FURTHER CLARIFICATION IS NEEDED</i>				
	10	430-6-5(3)	Did you complete a BCI form when hired?	
	10	24(8)	Openers and Closers (any one alone with children): Do you have current First Aid and CPR certification?	
	10	20(4)	Drivers: Do you have current First Aid and CPR certification?	
	7	7(3)(a)	Where are the center's written policies and procedures? Have you documented an understanding of these policies and procedures?	
	7	24(3)	How often are fire drills conducted? How often are disaster drills conducted?	
	7	7(3)(b)	Did you complete orientation training prior to being left alone with children which included:	
	7	7(3)(b)(i)	-job description?	
	7	7(3)(b)(ii)	-introduction and orientation to children?	
	7	7(3)(b)(iii)	-releasing children?	
	7	7(3)(b)(iv)	-policies and procedures?	
	7	7(3)(b)(v)	-reporting abuse?	
	7	7(3)(b)(vi)	-Informational Guide?	

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	7	7(5)	If you have been employed for over a year, have you completed the required 20 hours of annual training which included the following:	
	7	7(5)(a)	-nutrition?	
	7	7(5)(b)	-hand washing, OSHA?	
	7	7(5)(c)	-administration of medication?	
	7	7(5)(d)	-ill children?	
	7	7(5)(e)	-accident prevention?	
	7	7(5)(f)	-reporting diseases?	
	7	7(5)(g)	-reporting abuse?	
	7	7(6)	If you are caring for infants and toddlers, did your annual training include the following:	
	7	7(6)(a)	-preventing Shaken Baby?	
	7	7(6)(b)	-preventing SIDS?	
	7	7(6)(c)	-coping with crying babies?	
	7	7(6)(d)	-brain development?	
	5	18(4)	Do you prepare or serve food? Do you have a current Food Handler's permit?	
	3	7(4)	Have you been employed for more than 30 days? Have you had a TB screening?	

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CHILDREN RECORDS																
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61-80+	15	6	60%	50%	40%	25%	0%									
Child's date of birth																
7	8(2)(a)(ii)(C)	admission agreement with -child's name -child's date of birth -child's date of enrollment -parent's name, address, phone number -emergency people's name, address, phone number -names of pick-up people														
7	8(2)(a)(ii)(B)	transportation and medical treatment releases														
7	10(1)	immunizations														
7	10(3)	health assessment: initial and annual review														
7	10(3)(a)	-allergies and sensitivities														
7	10(3)(b)	-chronic illnesses														
7	10(3)(c)	-medical conditions														
7	10(3)(d)	-disabilities														
7	10(3)(e)	-date of last physical														
7	10(3)(f)	-routine daily care														
7	10(3)(g)	-current medications														
7	10(3)(h)	-emergency care														
7	8(2)(b)(i)(A)	6 wk child attendance														
7	8(2)(b)(i)(B)	6 wk record of injuries, incidents, and accidents														
7	8(2)(b)(i)(C)	6 wk record of medications administered														

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Child's date of birth																
	7	8(2)(a)(ii)(C)	admission agreement with -child's name -child's date of birth -child's date of enrollment -parent's name, address, phone number -emergency people's name, address, phone number -names of pick-up people													
	7	8(2)(a)(ii)(B)	transportation and medical treatment releases													
	7	10(1)	immunizations													
	7	10(3)	health assessment: initial and annual review													
	7	10(3)(a)	-allergies and sensitivities													
	7	10(3)(b)	-chronic illnesses													
	7	10(3)(c)	-medical conditions													
	7	10(3)(d)	-disabilities													
	7	10(3)(e)	-date of last physical													
	7	10(3)(f)	-routine daily care													
	7	10(3)(g)	-current medications													
	7	10(3)(h)	-emergency care													
	7	8(2)(b)(i)(A)	6 wk child attendance													
	7	8(2)(b)(i)(B)	6 wk record of injuries, incidents, and accidents													
	7	8(2)(b)(i)(C)	6 wk record of medications administered													

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POTENTIAL QUESTIONS THAT MAY BE ASKED OF DIRECTOR				
	10	11(4)	What is the center's practice when some one unknown arrives to pick up a child?	
	10	11(6)	What is the practice if there is a life-threatening injury to a child?	
	10	12(8)	What are the ratios for off-site activities?	
	10	12(8)(e)	How do you identify children when they are away from the center?	
	10	12(8)(f)	Are children's names on the identifiers?	
	10	12(9)	Do care givers remain at pools with the children?	
	10	17(2)(3)	What discipline methods are used at the center?	
	10	18(6)(e)	How do you notify staff of children's allergies and food sensitivities?	
	10	24(4)	How do you ensure the center has a working telephone?	
	10	16(3)	What is the center's policy on firearms or weapons in the facility?	
	7	12(8)(a)	How do you ensure that at least one person with current First Aid and CPR certification is at any off-site activity?	
	7	6(5)(b)	How is staff trained to meet the needs of the children?	
	7	6(5)(c)	How do you handle the reporting of communicable diseases?	
	7	6(6)(a)	How do you monitor the use of tobacco at the facility?	
	7	6(6)(b)	How do you monitor the use of alcohol at the facility?	
	7	6(6)(c)	How do you monitor the use or possession of illegal substances at the facility?	
	7	6(6)(d)	How do you monitor the use or possession of sexually explicit material at the facility?	

/	#	R430-100-	KEY WORDS	NOTES
	7	11(5)	What is your procedure concerning injury, incident, and accident reports?	
	7	12(8)(d)	What is your procedure for ensuring that staff take emergency numbers and treatment releases when off-site?	
	7	14(2)	How do you ensure personal hygiene items are not shared?	
	7	15(8)	Do care givers who diaper prepare food?	
	7	15(9)	Do staff who prepare food diaper or assist in toilet training?	
	7	21(4)	What is your procedure for the prevention of insects, rodents and vermin?	
	5	6(5)(d)	How often do you conduct safety inspections of the facility?	
	5	6(2)(d)	How do you keep Licensing informed if the facility's phone number changes?	
	5	6(3)	Do you or your designee have sufficient freedom from other duties to manage the facility? How often are you on the premises	
	5	7(3)	What are your minimum care giver qualifications?	
	5	9(6)	When can group size be exceeded?	

/	#	R430-100-	KEY WORDS	NOTES
	5	10(2)	What is your policy concerning children who become ill while at the center?	
	5	10(2)(a)	How do you separate ill children?	
	5	10(2)(b)	What is policy for contacting parents of ill children?	
	5	10(2)(c)	How do you inform parents when there has been a child at the center with a communicable illness?	
	5	10(2)(d)	How do you protect the confidentiality of the child with the illness?	
	5	11(7)	What would your procedure to notify Licensing if there is a fatality? a hospitalization? the use of an emergency medical response?	
	5	12(8)(g)	How do you ensure hand washing during an off-site activity?	
	5	19(7)	How do you inform parents of animals at the center?	
	3	10(1)(b)	Did you submit the Child Care Facilities Annual Summary Report to the Department of Health Immunization Program on November 30th?	
	3	11(2)	Is the center open to parents during business hours?	
	3	12(8)(b)	How do you obtain consent from parents for off-site activities?	
	3	12(8)(c)	How do you notify parents of schedule changes for an off-site activity?	
	3	17(4)	How do you notify parents of your discipline policies?	
	1	17(1)	Do you have rules of conduct for children, staff, and parents?	